Communication Champions: Training Rehab Clinicians to be Skilled Communication Partners and Communication Strategy Mentors

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Introduction
The Joint Commission states that patients have the right to effective communication with their care providers.¹

The problem:
- Patients with communication disorders experience communication barriers that compromise their communication access.²
- Decreased communication access impacts:
  - patient safety³
  - ability to indicate healthcare needs⁴
  - overall satisfaction with care⁶

One approach:
Communication Partner Training (CPT) has been shown to improve communication interactions for patients with aphasia,⁶,⁷ traumatic brain injury,⁶ and Alzheimer’s Disease.⁹

Previous work on CPT in healthcare settings showed a systems-level approach improved access to healthcare information for patients with aphasia.¹⁰ Further investigation is needed to develop training procedures tailored to specific healthcare sites.⁷

Communication Champions Program:
Designed to train Allied Health clinicians in a rehabilitation hospital system to be skilled communication partners. Quantitative and qualitative data were collected to examine program effectiveness.

10-Month Curriculum
- 5 in-person collaborative and didactic group meetings with role plays
- Tools to consolidate knowledge between each session

<table>
<thead>
<tr>
<th>MEETING FOCUS</th>
<th>INTERIM GOALS</th>
<th>TOOLS</th>
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<tbody>
<tr>
<td>1. Supported Conversation for Adults with Aphasia™ Training</td>
<td>Consolidate knowledge; Practice/apply strategies with patients</td>
<td>Practice Log</td>
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<tr>
<td>2. Patient Communication Strength Analysis</td>
<td>Increase experience/confidence; Engage colleagues</td>
<td>(Practice Log) Case Study Presentation</td>
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<td>3. Strategies for use with patients with Cognitive-communication disorders</td>
<td>Apply strategies with patients; Mentor colleagues</td>
<td>Mentorship Log</td>
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<tr>
<td>4. Fine tuning strategies, focus on written supports</td>
<td>Apply strategies with patients; Mentor colleagues</td>
<td>Mentorship Log</td>
</tr>
<tr>
<td>5. Program Evaluation/Feedback</td>
<td>Evaluate effectiveness, share discipline and site-specific feedback</td>
<td>Focus Group Questions</td>
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Conclusions
- Communication Champions Program participants increased communication strategy knowledge and confidence:
  - across disciplines
  - across sites of care
  - across experience levels
- Most changes occurred between Meetings 1-3, then generally maintained.
- Perceived benefit from combination of didactic teaching + role plays + practice at site to consolidate knowledge and skills.
- Perceived benefit from group diversity (multiple disciplines and sites of care).

Future Directions
- Curriculum is sustainable and will be scaled up through the professional development program to reach more clinicians.
- Adding “skills check outs” to verify skill acquisition more objectively.
- Adding environmental communication access and needs assessment.
- Planning advanced training for clinicians who wish to deepen knowledge and continue to build skills.

Methods
- 10-month CPT Program for rehabilitation clinicians
  - 5 in-person meetings
  - Pre-work and interim assignments
  - Developed & delivered by two SCA™ certified SLPs
  - Clinicians learned, then “championed” communication strategies for use with patients with a range of communication disorders
  - Offered through internal professional development program:
    - Recruited from all sites of care
    - Incentivized

Participants

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<tr>
<th>CLINICAL DISCIPLINE</th>
<th>SITE OF CARE</th>
<th>EXPERIENCE (YEARS)</th>
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<tbody>
<tr>
<td>OT (Neuro)</td>
<td>INPATIENT</td>
<td>1</td>
</tr>
<tr>
<td>SLP (Med Complex)</td>
<td>INPATIENT</td>
<td>1</td>
</tr>
<tr>
<td>PT (Ortho)</td>
<td>OUTPATIENT</td>
<td>6</td>
</tr>
<tr>
<td>SLP (Day Rehabilitation)</td>
<td></td>
<td>4</td>
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Data Collection
- Participants completed self-rating questionnaires re: knowledge and confidence with communication support strategies at each training point.
- Focus Group to gather participant feedback on program elements.

Results
Self-rating survey data

- Knowledge of Communication support strategies
  - (1 = no knowledge, 4 = somewhat knowledgeable, 7 = very knowledgeable)

Focus Group participant feedback on program elements/experience

Design of the program:
“…I feel like sometimes with articles there’s a lot of like…theory, theory, theory but no practice. So it was nice to have like the setup of ‘this is what we’re learning about. This is why it’s important.’ And then, do it.” (Day Rehab SLP)

Keeping a log for reflection on practices:
“…it’s like reflecting on, okay, sometimes you know these strategies but then implementing them is another thing. And then actually sitting back and being like, ‘well—okay, this is what I did. Could I have done something different that maybe would have gotten me the answer a little—you know—faster or quicker?’…Could I have used alternatives? Or was I on the right track with this?” (Outpatient PT)

Observed changes in the communication environment:
“One of our Speech Therapists used an example of like ‘you wouldn’t let your patient walk without their quad cane, why would you let them go anywhere without their paper?’” (Inpatient OT)

References

Acknowledgments
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